

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000024146

FILED
Feb 06, 2006
Secretary of State

Entity Name: CENTER OF SOLUTION GROUP, LLC

Current Principal Place of Business:

137 NORTHWEST 81ST WAY
CORAL SPRINGS, FL 33071

New Principal Place of Business:

Current Mailing Address:

224 POSSUM PASS
WEST PALM BEACH, FL 33413

New Mailing Address:

FEI Number: 34-1987701 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VONHASSELN, STEVE
137 NORTHWEST 81ST WAY
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: GILLIS, T.D. (DOC)
Address: 224 POSSUM PASS
City-St-Zip: WEST PALM BEACH, FL

Title: EXE () Delete
Name: VONHASSELN, STEVE
Address: 137 NORTHWEST 81ST WAY
City-St-Zip: CORAL SPRINGS, FL 33071

ADDITIONS/CHANGES:

Title: CEO (X) Change () Addition
Name: GILLIS, T. (DOC) D MR
Address: 224 POSSUM PASS
City-St-Zip: WEST PALM BEACH, FL 33413 US

Title: EXE (X) Change () Addition
Name: VONHASSELN, STEVE MR.
Address: 137 NORTHWEST 81ST WAY
City-St-Zip: CORAL SPRINGS, FL 33071

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: T. D. (DOC) GILLIS

MR.

02/06/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date